

OAHU CANDIDATES-
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

BRIAN SCHATZ

(b) Committee Name: FRIENDS OF BRIAN SCHATZ

(c) Mailing Address: 1716 KEEAUMOKU ST #602
HNL 96822

(d) Phone (Bus) 5869425 (Res) 5371688
Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

- ☐ 1st Preliminary Primary ☐ Amended ☐ First ☐ Third
☐ 2nd Preliminary Primary ☐ Short Form¹ ☐ Second ☐ Fourth
☐ Final Primary RECEIVED
☐ Preliminary General
☐ Final Election Period
☒ Supplemental

REPORTING PERIOD

7/1/99 through 12/31/99

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE	
1. Cash on Hand at the Beginning of the Election Period ²		0	1
2. Cash on Hand at the Beginning of this Reporting Period.....	813.35		2
3. Total Receipts (From Line 15).....	6278.60	50964.32	3
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	7091.95	50964.32	4
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	2864.96	46737.33	5
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	4226.79	4226.79	6
7. Total Loans at the Closing of this Reporting Period.....	0		7
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	0		8
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	0		9
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	4226.79		10

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Candidate Signature B. S. Date 1/28/00 Treasurer Signature [Signature] Date 1/28/00

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.

² An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	4678.60	28834.11	11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	1400	9856.51	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	6078.60	38690.62	11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	0	0	11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	200	7250	11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	200	7250	11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	6278.60	45940.62	12
13. Public Funds and Other Receipts.....	0	0	13
14. Loans.....	0	5000	14
15. Total Receipts (Add Lines 12 through 14).....	6278.60	50940.62	15
DISBURSEMENTS			
16. Expenditures.....	2864.96	46737.33	16
17. Loans Repaid or Forgiven.....	0	0	17
18. Unpaid Expenditures Paid or Forgiven.....	0	0	18
19. Subtotal Disbursements (Add Lines 16 through 18).....	2864.96	46737.33	19
20. Unpaid Expenditures.....	0		20
21. Total Disbursements (Add Lines 19 and 20).....	2864.96	46737.33	21

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
11/12/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Richard Hicks PO Box 939 Hon HI 96808	Attorney	1000.00	1000.00
11/11/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Thomas Gill 547 Halekauwila St Hon HI 96822	Attorney	200.00	250.00
11/13/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Iru Schatz 4983 Kolohehala St. Hon HI 96822	Physician	200.00	1,250.00
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....			6278.60	
2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....			6278.60	

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 3

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
10-18	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Kinko's 2575 S King Hon HI 96825	printing	8.12
10-18	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Kinko's	printing	110.42
10-18	<input type="checkbox"/> NON-MONETARY CONTRIBUTION US Postal Service	stamped envelopes	393.00
10-29	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Bank charge	service charge	1.50
11-8	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Hawaii News Agency 605 Kapiolani Blvd.	Advertisement	557.67
11-29	<input type="checkbox"/> NON-MONETARY CONTRIBUTION US Postal Service	Postage	33.00
9-16	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Subway Makiki Shopping Village Hon 96822	sandwiches	62.76

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....

1166.47

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

Form CC-5(B) (Rev. 5/99)

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 3

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9-16	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Papa John's Pizza 2875 Paa St Hon 96819	pizza	40.00
10-28	<input type="checkbox"/> NON-MONETARY CONTRIBUTION The Footprint Co., Ambassador Hotel Hon HI 96815	burger stickers	487.70
12-7	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Chris McDonough PO Box 75033 96815	photos	126.00
12-14	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Randy's Photo Lab 1911 King St Hon HI 96825	photos	56.25
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... **709.95**

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)..... **1876.42**

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**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME: _____

PAGE 3 OF 3

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
11/7/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Gourmet Express Kahala mae Hon 96816	Food (fundraise)	988.54
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... 2864.79

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)..... 2864.79

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